

<i>SERFF Tracking Number:</i>	<i>MDIC-127895423</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Medico Insurance Company</i>	<i>State Tracking Number:</i>	<i>50472</i>
<i>Company Tracking Number:</i>	<i>A18RATES2011</i>		
<i>TOI:</i>	<i>H10I Individual Health - Dental</i>	<i>Sub-TOI:</i>	<i>H10I.000 Health - Dental</i>
<i>Product Name:</i>	<i>A18rates2011</i>		
<i>Project Name/Number:</i>	<i>A18rates2011/A18rates2011</i>		

Filing at a Glance

Company: Medico Insurance Company	SERFF Tr Num: MDIC-127895423	State: Arkansas
Product Name: A18rates2011	SERFF Status: Closed-	State Tr Num: 50472
TOI: H10I Individual Health - Dental	Disapproved	
Sub-TOI: H10I.000 Health - Dental	Co Tr Num: A18RATES2011	State Status: Disapproved-Closed
Filing Type: Rate	Author: Karl Hug	Reviewer(s): Rosalind Minor
	Date Submitted: 12/14/2011	Disposition Date: 12/19/2011
		Disposition Status: Disapproved
Implementation Date Requested: 04/01/2012		Implementation Date:
State Filing Description:		

General Information

Project Name: A18rates2011	Status of Filing in Domicile: Pending
Project Number: A18rates2011	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Individual Market Type:
Overall Rate Impact: 19%	Filing Status Changed: 12/19/2011
	State Status Changed: 12/19/2011
Deemer Date:	Created By: Karl Hug
Submitted By: Karl Hug	Corresponding Filing Tracking Number:
Filing Description:	
Medico Insurance Company (NAIC 31119)	

RE: Filing of Rate Revision on Dental Vision and Hearing Plan

Rate Schedules for Dental Vision and Hearing Policy Forms MI-DVA18, MI-DVA18-3. (Rates were originally approved under product filing, Serff # MDIC-125606274.)

This filing includes the experience of the company and the supporting actuarial memorandum.

The submission includes a request for a 19% rate increase. Current and proposed rate schedules are enclosed.

SERFF Tracking Number: MDIC-127895423 State: Arkansas
Filing Company: Medico Insurance Company State Tracking Number: 50472
Company Tracking Number: A18RATES2011
TOI: H101 Individual Health - Dental Sub-TOI: H101.000 Health - Dental
Product Name: A18rates2011
Project Name/Number: A18rates2011/A18rates2011

Thank you for your review and approval of this filing. If you have any questions, please feel free to contact me.

Company and Contact

Filing Contact Information

Karl Hug, Compliance Analyst khug@gomedico.com
1515 S. 75th Street 800-695-5976 [Phone] 251 [Ext]
Omaha, NE 68124 402-391-4858 [FAX]

Filing Company Information

Medico Insurance Company CoCode: 31119 State of Domicile: Nebraska
1515 S. 75th Street Group Code: Company Type: Life and Health
Omaha, NE 68124 Group Name: Medico State ID Number:
(800) 695-5976 ext. [Phone] FEIN Number: 47-0122200

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation: one rate filing, one form in filing = \$50.00
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Medico Insurance Company	\$50.00	12/14/2011	54525554

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Sub-TOI: H101.000 Health - Dental

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Disapproved	Rosalind Minor	12/19/2011	12/19/2011

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Disposition

Disposition Date: 12/19/2011

Implementation Date:

Status: Disapproved

Comment:

Considering that the historical loss ratio still remains low, we are disapproving your request at this time.

Thank you for your understanding in this matter.

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Medico Insurance Company	19.000%	19.000%	\$44,864	652	\$236,125	19.000%	19.000%

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Disapproved	No
Rate	Rate Sheets for Dental Vision and Hearing policy	Disapproved	Yes

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Project Name/Number:	A18rates2011/A18rates2011		

Rate Information

Rate data applies to filing.

Filing Method:	Serff
Rate Change Type:	Increase
Overall Percentage of Last Rate Revision:	%
Effective Date of Last Rate Revision:	
Filing Method of Last Filing:	Serff

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
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Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:*	Rate Action Information:		Attachments
Disapprove Rate Sheets for Dental d 12/19/2011 policy	Vision and Hearing	MI-DVA18, MI-DVA18-3	Revised	Previous State Filing Number: Percent Rate Change Request:	38694 19.000	A18 DVH AR Rates as filed.pdf

Rate Schedules

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Supporting Document Schedules

		Item Status:	Status
			Date:
Satisfied - Item:	Health - Actuarial Justification	Disapproved	12/19/2011
Comments:			
Attachment:			
AR_A18_MIC ActlMemo.pdf			